Debtor(s)

SCHEDULE I - CURRENT INCOME OF INDIVIDUAL DEBTOR(S)

The column labeled "Spouse" must be completed in all cases filed by joint debtors and by a married debtor in a chapter 12 or 13 case whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.

Debtor's Marital Status	DEPENDENTS OF DEBTOR AND SPOUSE				
	NAMES	-	AGE	RELATIONSHIP/	21
Married	Nicholas		4	Son	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
	Bailee		1	Daughter	
			<u></u>		
Employment: DEBTOR				SPOUSE	
	rywaller	Secretai	rial		
	ame of Employer Fitzgerald Drywall Cert I		nternational		
		2 Wks			
Address of Employer Crossville TN C		Crossvil	Crossville TN		
]	DEBTOR	SPOUSE
	verage monthly income)				
	wages, salary, and commissions				
(pro rate if not paid monthly)			\$	\$	<u> 788.00</u>
Estimated monthly overtime			\$	\$	
SUBTOTAL			\$	\$	788.00
LESS PAYROLL D	EDUCTIONS				
a. Payroll taxes a			*		170.00
b. Insurance	ኢኒሲ ኦፌኒኒኒ	ו ראט נ	门流	*	1,0.00
c. Union dues	/4 \		(\$ 7 1	 ° -	
d. Other (Specify)	ソロしほとこ	J [<i>[[]]</i>] [ジナ	- 	
di onioi (opoon)			\$	* \$	
SUBTOTAL OF PAYI	ROLL DEDUCTIONS		\$	\$	170.00
	ILYTAKE HOME PAY		ф	de	C10 00
TOTAL NET MONTH	ILI TARE HOME PAT		⊅	\$	618.00
Regular income from of	peration of business or profession or farm				
(attach detailed stat			\$ 1	.,350.00 \$	
Income from real prope	rty		\$	\$	
Interest and dividends			\$	\$	
	or support payments payable to the debtor fo	or the	· ·		
debtor's use or that of	f dependents listed above		\$	\$	
Social Security or other	government assistance				
Specify			\$	\$	
Other monthly income					
Specify Plan Assistance from Parents			\$	100.00\$	
			\$	\$	
			\$	<u> </u>	
TOTAL MONTHLY IN	NCOME		\$ <u> </u>	.,450.00 \$	618.00
TOTAL COMBINED MONTHLY INCOME \$ 2,068.00			(Report also on Summary of Schedules)		
TO 11 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1					
Describe any increase or deci document:	rease of more than 10% in any of the above categories /	anticipated to occu	ir within	tne year following the	e filing of this

None

AMENDED SCHEDULE I (26 November 1998)

31

Debtor(s)

SCHEDULE J - CURRENT EXPENDITURES OF INDIVIDUAL DEBTOR(S)

Complete this schedule by estimating the average monthly expenses of the debtor and the debtor's family. Prorate any payments made bi-weekly, quarterly, semi-annually, or annually to show monthly rate.

☐ Check this box if a joint petition is filed and debtor's spouse maintains a separate household. schedule of expenditures labeled "Spouse".	Complete a separate
Rent or home mortgage payment (include lot rented for mobile home) Are real estate taxes included? Yes No _X	\$ 450.00
Is property insurance included? Yes No X	
Utilities: Electricity and heating fuel	\$ <u>133.00</u>
Water and sewer	\$30.00
Telephone	\$30.00
Other Home maintenance (repairs and upkeep)	\$
	\$
Food	\$ <u>400.00</u>
Clothing	\$ <u>10.00</u>
Laundry and dry cleaning	\$ <u>25.00</u>
Medical and dental expenses	\$ 35.00
Transportation	\$ <u>100.00</u>
Recreation, clubs and entertainment, newspapers, magazines, etc.	\$ <u>50.00</u>
Charitable contributions	\$
Insurance: (not deducted from wages or included in home mortgage payments)	
Homeowner's or renter's	\$
	\$
Health // /// [M] // [M] // [M]	\$
Auto Other	\$ 125.00 \$
Taxes (not deducted from wages or included in nome mortgage payments) (Specify)	\$
Installment payments: (In chapter 12 and 13 cases, do not list payments to be included in the plan	=
Auto	\$ 280.00
Other Les Schwab Other	\$ \$
Alimony, maintenance, and support paid to others	\$ \$
Payments for support of additional dependents not living at your home	\$
Regular expenses from operation of business, profession, or farm (attach detailed statement)	\$
Other day care	\$ 300.00
TOTAL MONTHLY EXPENSES (Report also on Summary of Schedules)	\$ <u>1,968.00</u>
(FOR CHAPTER 12 AND 13 DEBTORS ONLY)	
Provide the information requested below, including whether plan payments are to be made bi-weekly	y, monthly, annually.
or at some other regular interval.	
A. Total projected monthly income	\$ 2,068.00
B. Total projected monthly expenses	\$ 1,968.00
C. Excess income (A minus B)	\$ 100.00
D. Total amount to be paid into plan each	\$ 100.00
(interval)	

AMENDED SCHEDULE J (26 November 1998)